

# PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

Application or Docket Number

10/529215

## CLAIMS AS FILED - PART I

|                                  | (Column 1)  | (Column 2)                             |
|----------------------------------|---|--|
| U.S. NATIONAL STAGE FEES         |   |  |
| BASIC FEE                        | SMALL ENT. = \$ 150   | LARGE ENT. = \$ 300                    |
| EXAMINATION FEE                  | Satisfies PCT Article 33(1) (4) = \$ 60 / \$ 100                      | All other situations = \$ 100 / \$ 200 |
| SEARCH FEE                       | U.S. is ISA = \$ 60 / \$ 100<br>ALL other countries = \$ 200 / \$ 400 | All other situations = \$ 250 / \$ 500 |
| FEE FOR EXTRA SPEC. PGS.         | 15 minus 100 =  | 150 =                                  |
| TOTAL CHARGEABLE CLAIMS          | 12 minus 20 =   | -                                      |
| INDEPENDENT CLAIMS               | 2 minus 3 =   | -                                      |
| MULTIPLE DEPENDENT CLAIM PRESENT |   | <input type="checkbox"/>               |

\* If the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY TYPE ☐ OR

OTHER THAN SMALL ENTITY

| RATE       | FEE  |
|------------|------|
| BASIC FEE  | 150  |
| EXAM. FEE  | 100  |
| SEARCH FEE | 200  |
| X \$ 125 = |      |
| X \$ 25 =  |      |
| X \$ 100 = |      |
| + \$ 180 = |      |
| TOTAL      | 1450 |

| RATE       | FEE |
|------------|-----|
| BASIC FEE  |     |
| EXAM. FEE  |     |
| SEARCH FEE |     |
| X \$ 250 = |     |
| X \$ 50 =  |     |
| X \$ 200 = |     |
| + \$ 360 = |     |
| TOTAL      |     |

## CLAIMS AS AMENDED - PART II

|  | (Column 1)                       | (Column 2)                         | (Column 3)               |
|--|----------------------------------|------------------------------------|--------------------------|
| AMENDMENT A                                    | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA            |
| Total  | 12 Minus                         | 20                                 | 0                        |
| Independent                                    | 2 Minus                          | 3                                  | 0                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                                  |                                    | <input type="checkbox"/> |

SMALL ENTITY OR

OTHER THAN SMALL ENTITY

| RATE             | ADDITIONAL FEE |
|------------------|----------------|
| X \$ 25 =        |                |
| X \$ 100 =       |                |
| + \$ 180 =       |                |
| TOTAL ADDIT. FEE |                |

| RATE             | ADDITIONAL FEE |
|------------------|----------------|
| X \$ 50 =        |                |
| X \$ 200 =       |                |
| + \$ 360 =       |                |
| TOTAL ADDIT. FEE |                |

claims 1-9 canceled  
10, 19 indep

|  | (Column 1)                       | (Column 2)                         | (Column 3)               |
|--|----------------------------------|------------------------------------|--------------------------|
| AMENDMENT B                                    | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA            |
| Total  | 0 Minus                          | 20                                 | 0                        |
| Independent                                    | 0 Minus                          | 3                                  | 0                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                                  |                                    | <input type="checkbox"/> |

| RATE             | ADDITIONAL FEE |
|------------------|----------------|
| X \$ 25 =        |                |
| X \$ 100 =       |                |
| + \$ 180 =       |                |
| TOTAL ADDIT. FEE |                |

| RATE             | ADDITIONAL FEE |
|------------------|----------------|
| X \$ 50 =        |                |
| X \$ 200 =       |                |
| + \$ 360 =       |                |
| TOTAL ADDIT. FEE |                |

- \* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
  - \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than "20", enter "20".
  - \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than "3", enter "3".
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.